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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/027,978	10/24/2001	Michael W. Morrow	42390P12943

08791
BLAKELY SOKOLOFF TAYLOR & ZAFMAN
12400 WILSHIRE BOULEVARD, SEVENTH FLOOR
LOS ANGELES, CA 90025



CONFIRMATION NO. 1432

FORMALITIES LETTER



Date Mailed: 01/25/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

A copy of this notice MUST be returned with the reply.

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Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

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AT #3
DOCKET NO.: 42390P12943

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

MICHAEL W. MORROW

Application No.: 10/027,978

Filed: October 24, 2001

For: **APPARATUS AND METHOD TO PERFORM
ADDRESS TRANSLATION**

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Assistant Commissioner for Patents
Attention: Box Missing Parts
Washington, D.C. 20231

RESPONSE TO NOTICE TO FILE MISSING PARTS

Sir:

In response to the Notice to File Missing Parts mailed January 25, 2002, please find enclosed:

- a duly executed Declaration and Power of Attorney and payment in the amount of \$130.00 for the surcharge of 37 CFR § 1.16(e);
- substitute drawing(s) in compliance with 37 CFR § 1.84;
- and
- copy of the Notice to file Missing Parts of Application.

If any additional fee is required, please charge Deposit Account No. 02-2666. An extra copy of the Fee Transmittal is enclosed for deposit account charging purposes.

Respectfully submitted,

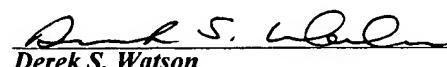
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP


Michael A. Proksch, Reg. No. 43,021

Dated: February 13, 2002

12400 Wilshire Blvd., 7th Floor
Los Angeles, California 90025

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Attention: Box Missing Parts, Washington, D.C. 20231 on: February 13, 2002.


Derek S. Watson
02/13/02
Date



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Section 8
#3

Approved for use through 10/31/2002, OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/027,978
		Filing Date	October 24, 2001
		First Named Inventor	Michael W. Morrow
		Group Art Unit	
		Examiner Name	
Total Number of Pages in This Submission	13	Attorney Docket Number	42390P12943

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <ul style="list-style-type: none"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
		<ul style="list-style-type: none"> - Check in the amount of \$130 - Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael A. Proksch, Reg. No. 43,021 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	February 13, 2002

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Box Missing Parts, Assistant Commissioner for Patents, Washington, D.C. 20231 on: February 13, 2002

Typed or printed name	Derek S. Watson		
Signature		Date	February 13, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FEB 28 2002

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#3

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEES TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
130.00

Complete if Known

Application Number	10/027,978
Filing Date	October 24, 2001
First Named Inventor	Michael W. Morrow
Examiner Name	
Group/Art Unit	
Attorney Docket No.	42390P12943

METHOD OF PAYMENT (check one)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number
02-2666

Deposit Account Name
Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of the application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
101	740	201	370
106	330	206	165
107	510	207	255
108	740	208	370
114	160	214	80
SUBTOTAL (1)		(\$)	

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
33	4	** = <input type="text"/>	X <input type="text"/> = <input type="text"/>	

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
103	18	203	9
102	84	202	42
104	280	204	140
109	84	209	42
110	18	210	9
SUBTOTAL (2)		(\$)	

*or number previously paid, if greater. For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3)	
		(\$)	
		130.00	

Complete (if applicable)

Name (Print/Type)	Michael A. Proksch	Registration No. (Attorney/Agent)	43,021	Telephone	(503) 684-6200
Signature	<i>Michael Proksch</i>			Date	02/13/02

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.

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